SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:				PAGE	: 3	36 (OF	79
(check only one)								
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Full Name (Last, First, Middle Initial) Marten Ladman		Date of Receipt		
Mailing Address 87 County Road 520	12 07 2015			
City	State Zip Code	Transaction ID : SA11AI.28363		
Morganville	NJ 07751	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	500.00		
Name of Employer	Occupation			
Self Employed	Oral Surgeon			
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00			
Full Name (Last, First, Middle Initial) Edward Laga		Date of Receipt		
Mailing Address 175 Academy St		M = M / D = D / Y = Y = Y		
Suite 1	State Zip Code	12 03 2015		
Presque Isle	State Zip Code ME 04769	Transaction ID : SA11AI.28364		
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 250.00		
Name of Employer	Occupation			
Edward A Laga Jr DDS	Oral Surgeon			
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00			
Full Name (Last, First, Middle Initial) Paul Lambert		Date of Desciret		
Mailing Address 5398 N Brookmeadow Wa	Date of Receipt 12 17 2015			
City Boise	State Zip Code ID 83713	Transaction ID : SA11AI.28365 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	1000.00		
Name of Employer	Occupation			
Meridian Health Science Center	Oral Surgeon			
Receipt For:	Aggregate Year-to-Date ▼			
Primary General Other (specify) ▼	3000.00			